

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 1202 / 1721  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**A.**Full Name (Last, First, Middle Initial)  
MR. ANDREW SEEFRIED

Mailing Address 3000 E. 13 MILE ROAD

City	State	Zip Code
WARREN	MI	48092-3785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	0	8

Transaction ID: SA11.12650758

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**B.**Full Name (Last, First, Middle Initial)  
MR. HENRY SEELIGSON

Mailing Address 7140 MIDCREST DR.

City	State	Zip Code
DALLAS	TX	75254-8030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HENRY SEELIGSON LAW OFFICEOccupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	0	8

Transaction ID: SA11.12653029

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**C.**Full Name (Last, First, Middle Initial)  
MR. JOSEPH SEELY

Mailing Address 145 CHERRY ST

City	State	Zip Code
MALDEN	MA	02148-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MICROWORKS COMPUTER CTROccupation  
SALES MGR/SALES REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	8

Transaction ID: SA11.12637047

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....